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## **COVER LETTER**

TO: Amendment Section Division of Corporations

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The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Aline De Oliveira Name of Contact Person Igreja Assembleia de Deus de Sarasota Firm/Company 5280 Sunnydale Circle Address Sarasota, Florida, 34233 City/State and Zip Code

worshipgeneration@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aline De Oliveira

Name of Contact Person

at (978 ) 490.8053

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporatio	517.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	_
1. The name of t	the corporation: Igreja Assen	nbleia de Deus de Sarasota	
2. The principal	office address: 1941 6th St,	Sarasota, FI - 34236	
3. The mailing a	ddress (if different): 5280 Sui	nnydale Circle, Sarasota, Fl - 34233	
4. Date of incorp	poration/qualification: 01/26/2	007	
	I street address of the current regi tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	Carlos A DeOliveira - r	esigned	
	2518 Wood Oak Dr		
	Sarasota, Florida - 342	232	
6. The name and (if changed):	I street address of the new registe	red agent (if changed) and /or registered office	
	Israel Marcelino DaSilv	<u>⁄a</u>	
	3701 Tuckerton Dr	AHAS	71
	P.O. Box NOT acceptable		
	Land O Lakes, Florida	_ <del></del>	Ö
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its registered as	gent,
Such change wa authorized by th	is authorized by resolution duly in hoard, or the corporation has b	adopted by its board of directors or by an officer so been notified in writing of the change.	
	ge of an officer or director	Aline De Oliveira - secretary	
I hereby accept I further agree t	the appointment as registered a to comply with the provisions of	gent and agree to act in this capacity. all statutes relative to the proper and complete h and accept the obligation of my position as registered to to reflect a change in the registered office address, I otified in writing of this change.	i
		09/18/2018	_
	nature of Registered Agent	Date	
0 0	half of an entity:		
	elino DaSilva	-	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*